FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZAT	ΓΙΟΝ		
1 Ottown 1	(See instructions)			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
SYNERGY PAC	;			
ADDRESS (number and s	treet) 6849 Old Dominion Dri	ve 	1111	
(Check if address is changed)	Suite 222		1111	
	McLean		VA L	22101 -
	С	ITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-ma	il address)		
(Check if address is changed)	None 			
COMMITTEE'S WEB I (Check if address is changed)	PAGE ADDRESS (URL) None			
2. DATE 0.3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		-	
3. FEC IDENTIFICA	TION NUMBER C	C00409623		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my knowle	edge and belief it is true, correct an	d complete	
Type or Print Name of	Treasurer Leslie J. Kerman			
Signature of Treasurer	Electronically Filed by Leslie J. Ker	rman	Date 03	26 / 2009
NOTE: Submission of fals	se, erroneous, or incomplete information may su			es of 2 U.S.C. S437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)